

# Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV 08/01/2012)

Calendar Year: 2013		Entity Name: Providence Holy Family Hospital						
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non- Taxable Benefits	(E) Total
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 Alex Jackson	X		168,223	20,000	20,212	13,827	12,119	234,381
2 Sharon Hershman			134,881	10,476	0	16,524	18,572	180,453
3 Roberta Thorn			131,926	10,483	0	12,177	18,288	172,874
4 John Landkammer			135,308	0	0	4,721	18,612	158,641
5 Norman McLarin			118,763	0	3,255	902	18,107	141,027
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135

email: hos@doh.wa.gov